MERGE HEALTHCARE Inc

Form 4

January 16, 2009

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

(Middle)

Merrick RIS, LLC

2. Issuer Name and Ticker or Trading

Symbol

MERGE HEALTHCARE Inc

[MRGE]

3. Date of Earliest Transaction

(Month/Day/Year) 01/14/2009

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

X__ 10% Owner

_ Other (specify

OMB APPROVAL

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

233 NORTH MICHIGAN

AVENUE, SUITE 2330

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

below)

6. Individual or Joint/Group Filing(Check

Applicable Line)

_X__ Director

Officer (give title

Form filed by One Reporting Person _X_ Form filed by More than One Reporting

Person

CHICAGO, IL 60601

(City)	(State)	(Zip) Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)	on(A) or Di	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
G			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	01/14/2009		P	5,100	A	\$ 1.25	27,963,137	D	
Common Stock	01/15/2009		P	13,200	A	\$ 1.2	27,976,337	D	
Common Stock	01/15/2009		P	4,075	A	\$ 1.23	27,980,412	D	
Common Stock	01/15/2009		P	26,125	A	\$ 1.25	28,006,537	D	
Common Stock	01/16/2009		P	14,800	A	\$ 1.25	28,021,337	D	

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	4	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	ction	Number	Expiration D	ate	Amou	nt of	Derivative	
Security	or Exercise		any	Code	(of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	8) I	Derivative			Securi	ties	(Instr. 5)	
	Derivative				5	Securities			(Instr.	3 and 4)		
	Security				1	Acquired						
					((A) or						
					I	Disposed						
					(of (D)						
					(Instr. 3,						
					4	4, and 5)						
										A		
										Amount		
							Date	Expiration	m: d	or		
							Exercisable	Date	Title Number			
				G 1		(A) (D)				of		
				Code	V ((A) (D)				Shares		

Deletionships

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Merrick RIS, LLC 233 NORTH MICHIGAN AVENUE SUITE 2330 CHICAGO, IL 60601	X	X					
FERRO MICHAEL W JR 233 NORTH MICHIGAN AVENUE, SUITE 2330 CHICAGO, IL 60601	X	X					

Signatures

Julie Ann B. Schumitsch, by Power of Attorney for Merrick RIS, LLC					
**Signature of Reporting Person	Date				
Julie Ann B. Schumitsch, by Power of Attorney for Michael W. Ferro, Jr.					
**Signature of Reporting Person	Date				

Reporting Owners 2

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Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Remarks:

The reporting persons are Merrick RIS, LLC ("Merrick"), a Delaware limited liability company, and Michael W. Ferro, Jr. ("Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.